

<u>Priority</u>	<u>Program</u>	<u>Reduced Resource Option</u>	<u>Description</u>	<u>FY 2008 SGF</u>	<u>FY 2008 AF</u>
	KMAP	Eliminate MediKan	The existing MediKan program for individuals in the process of applying for Social Security Disability would be eliminated on July 1, 2007. No beneficiaries would be grandfathered into the program and all new applicants would be screened through the presumptive disability determination process.	(9,200,000)	(9,200,000)
	KMAP	Restricted Formulary for MediKan	This proposal would create a formulary for MediKan beneficiaries targeting generic drugs or drugs that have the lowest net cost to the state. Coverage of some drug classes would be limited because few generic drugs are available, such as atypical antipsychotics. In FY 2006, MediKan paid \$7.2 million for brand name drugs and we estimate that with this reduced resource proposal that amount could be reduced to \$2.0 million.	(5,200,000)	(5,200,000)
	KMAP	Increase HealthWave Premiums for Title XXI beneficiaries	The family premium would increase by \$10 per month. Only HealthWave Title XXI beneficiaries can be charged a premium. This would raise the premium amounts from \$20 to \$30 for families between 151% and 175% of the federal poverty level (FPL), and from \$30 to \$40 for families up to 200% FPL. At this level of premium, six states would have higher cost sharing amounts than Kansas.	(176,000)	(639,000)
		Remove coverage for adult vision services	Vision services are currently covered for adults (age 21 and over). The coverage includes vision exams and eyeglasses once every four years. It also includes cataract services like exams, surgery, and follow-up care. All adult vision services are optional according to CMS guidelines. Without vision services through Medicaid, adults may not be able to maintain their independence and may have other medical needs that are unmet.	(440,000)	(1,100,000)
		Remove coverage for adult hearing and audiology	Adult participants (age 21 and over) are currently covered by Kansas Medicaid for hearing exams and hearing aids every four years. All audiology services for adults are optional according to CMS guidelines.	(120,000)	(300,000)
		Remove coverage for adult non-emergency medical transportation	Adult participants (age 21 and over) are currently covered by Kansas Medical Assistance Program for transportation to Medicaid covered services. Transportation services for adults are optional according to CMS guidelines. This would limit access to other health care services for individuals that do not have transportation of their own or other means to reach medical appointments.	(2,840,000)	(7,100,000)
		Remove coverage for adult dental services	Adult participants (age 21 and over) have limited dental coverage. Current coverage includes extractions and removal of lesions and tumors. Dental services are optional under CMS guidelines. Without these emergency and rudimentary dental services, adults in Medicaid could have severe health impacts from infected teeth and gums.	(600,000)	(1,500,000)
		Remove coverage for hospice services for adults	Coverage of care for end of life services in a hospice setting are optional Medicaid services. Eliminating hospice coverage for adults could lead to higher expenditures in more expensive settings, such as hospitals or nursing homes.	(1,000,000)	(2,500,000)
		Reduce physician rates to 100% of Medicare	Several physician payment rates in Kansas Medicaid are above the comparable Medicare rate. This reduction would lower physician rates that to 100% of the comparable Medicare, except for mental health procedures. The provider assessment revenue was used to raise all Medicaid physician rates to 83% of the Medicare rate, but rates that were higher than 83% were left the same. This included rates that were over the comparable Medicare rate. Reducing physician rates could reduce access to physician services.	(1,300,000)	(3,250,000)
				(20,876,000)	(30,789,000)